CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR	No.	OFFICEUSEONLY		
	NOCAMAME LAST	SWIFFIOK	Date Received		
4 CANDIDATE // OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE # TO SUITE # T	STATE: ZIP CODE	1/15/19 SM		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION .	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST SAME NUCKNAME LAST	MUI Sauffick	Receipt # Amount S Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SL	UITE#: CITY: STATE:	ZIP GODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION:			
9 REPORT TYPE	January 15 30th day before elect		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OHI-FR)		
10 PERIOD COVERED	Month Day Year	THROUGH	15 / 19		
11 ELECTION	ELECTION DATE Month Day Year Primary General	ELECTION TYPE Grant Description Special			
12 OFFICE	COUNCIL PLACE	13 OFFICE SOUGHT (# known)			
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME CRAM MOORF 15 Filer ID (Ethics: Commission Filers)					
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE OF OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME	A		
	SPECIFIC)			
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAM	E		
		COMMITTEE CAMPAIGN THEASURER AD	JRESS:		
17 CONTRIBUTION TOTALS	1. TOTAL P PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 O S. LOANS, OR GUARANTEES OF LOA	R LESS (OTHER THAN NS), UNLESS ITEMIZEI	\$	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARAN	NTEES OF LOANS)	\$	
EXPENDITURE TOTALS		OLITICAL EXPENDITURES OF \$100 O ITEMIZED	R LESS,	\$	
	4. TOTALI	POLITICAL EXPENDITURES		\$	
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$			\$	
18 AFFIDAVIT	*********				
I swear, or affirm Index penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under 7de 15, Election Code. Signature of Candidate or Officeholder					
Signature of Candidate or Officeholder AFFIX NOTARY STATES SEAL PROVE					
Sworn to and subscribed before me, by the said					
EMarin Susana Marin City Secretary					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					